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Contributors

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RADNORSHIRE COUNTY COUNCIL
and
RADNORSHIRE EDUCATION COMMITTEE



ANNUAL REPORTS
of the
County Medical Officer of Health
County Welfare Officer
and
Principal School Medical Officer
for
1970

F. J. H. CRAWFORD, M.D., B.Sc., D.P.H.

Barrister-at-Law

COUNTY HALL - LLANDRINDOD WELLS

Telephone No. - Llandrindod Wells 2262

RADNORSHIRE COUNTY COUNCIL

and

RADNORSHIRE EDUCATION COMMITTEE

A N N U A L R E P O R T S

of the

COUNTY MEDICAL OFFICER OF HEALTH

COUNTY WELFARE OFFICER

and

PRINCIPAL SCHOOL MEDICAL OFFICER

for

1 9 7 0

F.J.H. Crawford, M.D., B.Sc., D.P.H.,

Barrister-at-Law

Telephone No. Llandrindod Wells 2262

RADNORSHIRE COUNTY COUNCIL

MEMBERS OF THE COUNTY COUNCIL

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R.L. Ryder
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V.D. Whiting
S.K. Williams, M.B.E.

Health Committee
(As at 31st December, 1970)

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R.P.L. Hughes

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E.L. Evans
T.C. Evans
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E.T. Harris

D.T. Joseph
R.E. Knill
H.A. Peter
N.F. Reay
W.E.J. Watson
V.D. Whiting

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Dr. H.J. Houghton
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Bart., M.V.O.

Welfare Services Committee
(As at 31st December, 1970)

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Vice-Chairman:

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Alderman R.P.L. Hughes

Aldermen:

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E.T. Kinsey Morgan, C.B.E.

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E.L. Evans
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J.I. Hargest
G.D. Morgan

A.L. Pritchard
R.L. Ryder
Mrs. R.M. Thomas
L.P. Havard
W.E.J. Watson
V.D. Whiting

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Mr. F.G.J. Dalton
Lady Elizabeth Holland
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Mrs. K.J. Morgan

Mrs. K.H.G. Davies
Miss D.A. Payne, M.B.E.
The Hon. Gwenllian Philipps, O.B.E.
Mrs. J.P. de Winton

RADNORSHIRE EDUCATION COMMITTEE

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Councillor T.O. Nicholls, O.B.E.

Vice-Chairman:

Councillor C.A. Masters

All members of the County Council together with the following co-opted members:

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Archdeacon T.E. Griffiths
Mrs. M. Howse
Mr. W. Denver James
Mrs. S.M. Coltman Rogers
Mrs. K.J. Morgan

Lady Delia Venables-Llewelyn
Brigadier Sir C.M.D. Venables-Llewelyn,
Bart., M.V.O.
Mrs. G.M. Walker
Rev. T.H. Williams

Special Services Sub-Committee (As at 31st December, 1970)

Chairman:

Councillor O. Gibbin

Vice-Chairman:

Councillor R.J. Griffiths

Aldermen:

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W.H. Edwards
R.P.L. Hughes
V.T. Jones

E.T. Kinsey Morgan, C.B.E.
Penry Pritchard
T.F. Vaughan-Prickard, C.V.O.
J. Watkins

Councillors:

J.C. Deakins
E.L. Evans
T.C. Evans
J.I. Hargest
E.T. Harris
L.P. Havard
R.E. Knill
Harri Lewis, C.B.E.
C.A. Masters

G.D. Morgan
T.O. Nicholls, O.B.E.
Mrs. A.V. Parkinson
H.A. Peter
G.H. Price
N.F. Reay
Mrs. R.M. Thomas
W.E.J. Watson

Co-opted:

Mr. W. Denver James
Mrs. M. Howse
Rev. T.H. Williams
Mrs. K.J. Morgan

Lady Delia Venables-Llewelyn
Brigadier Sir C.M.D. Venables-Llewelyn,
Bart., M.V.O.

STAFF

County Medical Officer of Health
County Welfare Officer and
Principal School Medical Officer

F.J.H. Crawford, B.Sc., Ch.B., M.D.,
M.R.C.S., L.R.C.P., D.P.H.
Barrister-at-Law, Middle Temple

Deputy County Medical Officer of Health
and Deputy Principal School Medical
Officer (part-time)

M. Dilys Owen, J.P., B.Sc., M.B., Ch.B.,
D.P.H., D(Obst)R.C.O.G.

School Medical Officers (part-time)

B.C. Davies, B.M., B.Ch., D(Obst)R.C.O.G.
R.J. Walker, M.B., B.Ch.
Beryl A. Davies, B.Sc., M.B., B.Ch.

Consultant Psychiatrist and Adviser in
Mental Health (part-time)

G. Diggle, M.B., Ch.B., M.R.C.P.(Ed.),
D.P.M.

Chest Physician (part-time)
Assistant Chest Physician (part-time)
School Ophthalmic Surgeon (part-time)
Medical Officer at Family Planning Clinic
County Dental Officer and
Principal School Dental Officer
County Nursing Officer,
Supervisor of Midwives and Home Help
Organiser
Psychiatric Social Worker (part-time)
Mental Welfare Officers

D.I.A. Williams, M.B., Ch.B.
P.P. Mulhall, M.B., Ch.B., B.A.O.
S.S.F. Munro, M.B., Ch.B., D.O.M.S.
Beryl A. Davies, B.Sc., M.B., B.Ch.
P.G.H. Griffith, L.D.S.

Irene Snape, S.R.N., S.C.M., H.V.Cert.,
Queens Nurse.

Dental Attendant
Speech Therapist (part-time)
Home Teacher of the Blind
Craft Instructress
County Chiropodist
Physiotherapists (part-time)

Gwendoline Morgan
F.J. McDermott, R.M.N.
All District Nurses, Health Visitors and
H.E. Morris (part-time)
Olwen P. Mantle
Morag Morley, L.C.S.T.
R.A. Oldbury
Patricia Richards
J.S. Jose, M.Ch.S., S.R.Ch., M.C.S.P., S.R.I.
Haulwen Davies, M.C.S.P., S.R.P.
Anne Duggan, M.C.S.P., S.R.P.

Officer-in-Charge (Central Ambulance
Control, part-time)
County Analyst
Clerical Staff:

T.A.O. Meredith
D.C. Jenkins, M.Sc., F.R.I.C., D.I.C.
W.J. Meredith (Chief Clerk)
G.E.H. Steventon
Enid L. Barker
W.S. Evans
Maureen Davies (Appointed 2.3.70)
Glenis Davies
Vera Prossor
Gwyneth Phillips

District Nurses:

The following District Nurses and Health Visitors are employed by the County Council. The nursing services are otherwise the responsibility of the Radnorshire County Nursing Association, half of the members of the Executive Committee being appointed by the County Council.

<u>Nursing Area</u>	<u>Name of Nurse</u>	<u>Qualifications</u>
Beguildy	Ida M. Jones	S.R.N., S.C.M., Queens Nurse
Cwmbach & Newbridge	Barbara Hamar	S.R.N., S.C.M.
Clyro	Elizabeth F. Price	S.R.N., S.C.M.
Llandewi	Gwyneth Lewis	S.R.N.
Llandrindod Wells	Beryl Pugh	S.R.N., Queens Nurse
Nantmel	Winifred L. Roe	S.R.N., S.C.M.
New Radnor	Iris M. Davies	S.R.N., S.C.M.
	Frances M. Niblett (part-time)	S.R.N.
Paincastle	Mary Hayward	S.C.M., S.E.N.
Penybont	Christine McDermott	S.R.N., S.C.M.
Presteigne	Norline Baynham	S.R.N., S.C.M.
	Joan B. Parker (part-time)	S.R.N.
	Harold H. Hambleton (part-time)	R.M.N.
Rhayader	Olwen Wingfield	S.R.N.
Supply Nurse	E. Phyllis Lewis	S.R.N., S.C.M., Queens Nurse
	Pauline Hayes	S.E.N.
	Myra C. Jones	S.R.N., S.C.M.

Health Visitors & School Nurses

Margaret K. Chaplin (part-time)	S.R.N., S.C.M., H.V.Cer Queens Nurse
Enid M. Hamar	S.R.N., S.C.M., H.V.Cer Queens Nurse
Christine Green	S.R.N., S.C.M., H.V.Cer
Yvonne Fenwick	S.R.N., S.C.M., H.V.Cer Queens Nurse

Staff of the County Welfare Department
(Not included in the Health Department)

District Welfare Officers

W.L. Wilding, J.P., Llandrindod Wells.
H.E. Morris, Knighton.
Mary Williams, Rhayader.

Superintendent and Matrons of Old People's Homes

Mrs. G.M. Phillips, The Cottage, Knighton.
Mrs. M. Harrold, S.R.N., S.C.M., Wylesfield, Llandrindod Wells.
Miss E. Stephens, S.R.N., S.C.M., Hafan, Rhayader.

Associated Officers

Clerk of the Council	D.C.S. Lane
County Treasurer	C. Roberts, F.I.M.T.A., F.R.V.A.
County Surveyor	J.J. Teesdale, A.M.I.C.E., A.M.I.Mun.E., A.M.I.Struct.E.
Chief Education Officer	R.W. Bevan, B.A.
Educational Psychologist	A. Gilder, M.Ed.
County Architect and County Planning Officer	G.L. Edwards, Dip.Arch., A.R.I.B.A.
Children's Officer	Ceinwen Anthony, S.R.N., S.C.M., H.V.Cert.
Inspector of Weights and Measures and Inspector of Food and Drugs	R.W. Price
Clerk of the Radnorshire Executive Council	P.D. Jarvis

Health Officers of District Councils
Medical Officers of Health (Part-time)

Urban Districts:

Knighton	B.C. Davies, B.M., B.Ch., D(Obst)R.C.O.G.
Llandrindod Wells	H.E. Lichtenstein, B.A., M.B., B.Ch., D(Obst)R.C.O.G.
Presteigne	R.J. Walker, M.B., B.Ch.

Rural Districts:

Colwyn	D.F. Cameron, M.B., Ch.B.
Knighton	J.G. Garman, M.R.C.S., L.R.C.P.
New Radnor	R.H. Jobson, M.B., Ch.B.
Paincastle	W.M.E. Anderson, D.S.O., B.A., M.D., B.Ch.
Rhayader	J. Davies, M.B., B.Ch.

Public Health Inspectors

Urban Districts:

Knighton	H. Jones, M.R.S.H., M.I.Mun.E.
Llandrindod Wells	R.J. Morris, A.R.I.C.S., M.R.S.H., Cert.P.H.I.
Presteigne	L. Allen, M.A.P.H.I.

Rural Districts:

Colwyn	J.C. Bowen, M.A.P.H.I., C.R.S.H., M.R.I.P.H.H.
Knighton	D.I. Davies, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.
New Radnor	L. Allen, M.A.P.H.I.
Paincastle	W.D. Morgans, C.R.S.H.
Rhayader	G.H. Roberts, M.R.S.H., M.A.P.H.I.

Associated Officers

Mr. G.H. Roberts, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	County Engineer
Mr. E. Stephens, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	County Surveyor
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	County Architect and
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	County Planning Officer
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	Children's Officer
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	Inspector of Factories and Workshops
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	Inspector of Food and Drugs
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	Chief of the Probationary Department
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	Council

Medical Officers of Health (Part-time)

Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	Urban District:
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	Colwyn
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	Knighton
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	New Radnor
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	Paincastle
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	Rhayader

Public Health Inspectors

Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	Urban District:
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	Colwyn
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	Knighton
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	New Radnor
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	Paincastle
Mr. J. Williams, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.	Rhayader

1970 Annual Report

To the Chairman and Members of the Radnorshire County Council and Education Committee.

I now submit to you my Annual Report for 1970 on the county health services, including the school health service.

Although as I have said in previous reports our population is too small to enable firm conclusions to be drawn from vital statistics, yet it must be admitted that the statistics for the year 1970 are disappointing.

Deaths at 242 exceeded by 5 the total number of live births and the death rate was above that for England and Wales. The Radnorshire birth rate at 12.7 was much below the rate of 16.0 for England and Wales. Happily the infant mortality rate at 13.0 was good, and below that for England and Wales which was 18.0. The high perinatal mortality rate which was twice that for the country as a whole was almost entirely the result of the number of stillbirths. The stillbirth rate for illegitimate babies was indeed extremely high. Nevertheless of the total of ten stillbirths only one could be considered as possibly preventable.

During the year the County Council decided in principle on the erection of a Health Centre adjoining the Llandrindod Wells Hospital. As yet, however, those general medical practitioners serving the area wish to continue to work from their own surgeries. This attitude seems likely to change when there is full appreciation of the advantages of work being based on a Health Centre.

Close co-operation is maintained with both the hospital and general practitioner services. I attend meetings of the Hospital Management Committee and the Local Medical Committee and co-operation with local general practitioners is very close on a Christian name basis. Any queries or difficulties are speedily dealt with in a personal manner.

There have been difficulties in arranging for nurse and health visitor attachment and there is little demand for this. However, one Health Visitor is attached to a group practice and one District Nurse to a single handed practice. In both cases the arrangement has worked well.

The Family Planning Clinic increased in popularity during the year and a higher proportion of those attending desired contraceptive help as compared with those who requested cervical smears to be taken.

It is to be noted that on average twice as many women die of cancer of the lung as die of cervical cancer, yet so many women continue to smoke and incidentally in so doing encourage their children to take up this dangerous habit.

How long must we wait before strong action is taken by Government to stop all advertising of tobacco, and to make illegal all cigarette vending machines?

Rubella vaccination for girls between eleven and thirteen years of age was introduced during the year and the response from parents was good; in fact, the consent rate was 91%. 212 of these girls were vaccinated by me in the schools, the others receiving their injections from their family doctors.

A new Land Rover ambulance with Lomas body was supplied to the Presteigne Ambulance Station. This is a type of vehicle which has been found very satisfactory in our hilly terrain.

Radio transmitting and receiving instruments were installed in all the county ambulances in the summer, but owing to General Post Office difficulties in laying the land line to the transmitter, the service was not in operation at the end of the year. Our radio control is sited at the Llandrindod Wells Hospital, where, by arrangement with the Hospital Management Committee we have our Central Ambulance Operational Control.

Mrs. Morley, our part-time Speech Therapist resigned, temporarily, for family reasons on the 27th February. She in fact recommenced work with the authority on the 6th January, 1971.

No report on the school health service would be complete without reference to the most helpful assistance given to the service by Miss A. Gilder, the Educational Psychologist.

Our mobile dental clinic which was purchased in 1953 and had served the county so well, was replaced by a new mobile unit. The new unit, like the old one, is of course completely equipped with x-ray apparatus, high speed drill and all other modern requisites for efficient dentistry. The old mobile clinic has been retained as it will be necessary for the second dental officer, when appointed, to use this, but it is essential that a further new mobile unit be purchased at the earliest opportunity.

The County Council approved in principle the fluoridation of public water supplies in 1963. Nevertheless the only fluoridated water available to people in Radnorshire is from the Birmingham Corporation water undertaking, the source of which is impounding reservoirs in the Elan and Claerwen valleys, water from these being fluoridated at source since June 1964.

Areas supplied by this water include parts of the Rhayader and New Radnor Rural Districts and the Urban District of Knighton. A pipe line to bring this water to the Llandrindod Wells Urban District was being laid during the year. Eventually it is hoped that some of the smaller water supplies serving the county will be fluoridated by the Radnorshire and North Breconshire Water Board.

During the year the Local Government Social Services Act received the Royal Assent, with the consequent imminent dismemberment of our combined Health and Welfare Department. Time will show whether this new pattern of services will lead to a better deal for the old and handicapped. What is certain is that the cost of the services will increase with a considerable increase in expenditure on administration.

Meanwhile, we await the Government's final decision on the pattern of health services in this country in the future. It is to be hoped that this much needed unification of the present three separate branches of the service will not lead to a swamping of the preventive activities by the more affluent hospital sector, and that the Community Physician in the future will be enabled to play a vigorous role as guardian of community health.

At the same time as the new health service takes shape the new local government authorities will take over. Much will be gained in efficiency but something may well be lost in the transition. Services in a tiny county such as Radnorshire have a personal quality which is difficult of achievement in a larger authority.

I wish to express my thanks to the Chairmen and members of the Health Committee, the Welfare Committee and the Education Committee for their interest and support. Thanks are also due to many voluntary workers who help in providing services and last but not least to the staff of the county health service itself.

I am,

Your obedient servant,

Frank J.H. Crawford.

General Statistical Summary of the County

Statistics relating to population, births and deaths are provided by the Registrar General.

The number of births, stillbirths and deaths allocated to the area are those registered during the year 1970, adjusted for inward and outward transfers.

The following is a summary of the vital statistics for the county.

Area in acres	301,165
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Population (Registrar General's Estimate)

Urban Districts	6,760	
Rural Districts	11,830	18,590

Urban Districts:

Knighton	2,200	
Llandrindod Wells	3,250	
Presteigne	1,310	6,760

Rural Districts:

Colwyn	1,630	
Knighton	2,540	
New Radnor	1,970	
Painscastle	1,570	
Rhayader	4,120	11,830

Total County	18,590
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Rateable Value	£600,275
----------------	----------

Product of Penny Rate	£5,851
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<u>Live Births</u>	M	F	Total
Legitimate	117	104	221
Illegitimate	8	8	16
	125	112	237

	<u>Radnorshire</u>	<u>England and Wales</u>
Live birth rate per 1,000 population	12.7	16.0
Illegitimate live births per cent of total births	7.0	8.0

Stillbirths

Legitimate	4
Illegitimate	6
Total	10

Stillbirth rate per 1,000 total live and stillbirths	40.0	13.0
Total live and stillbirths	247.0	

Deaths of Infants under 1 year of age

Legitimate	2
Illegitimate	1
Total	3

Infant mortality rate per 1,000 live births	13.0	18.0
Legitimate infant mortality rate per 1,000 legitimate live births	9.0	11.0
Illegitimate infant mortality rate per 1,000 illegitimate live births	63.0	26.0
Neo-natal mortality rate per 1,000 (under 4 weeks)	8.0	12.0
Early neo-natal mortality rate per 1,000 (under 1 week)	4.0	11.0
Peri-natal mortality rate (stillbirths and deaths under 1 week combined, per 1,000 live and stillbirths)	45.0	23.0
Maternal deaths (including abortion)	Nil	
Maternal mortality rate per 1,000 live and stillbirths	Nil	
Legitimate birth rate per 1,000 population	11.8	
Illegitimate birth rate per 1,000 population	0.8	
Stillbirth rate per 1,000 population	0.5	

Deaths -

Total deaths	242.0	
Death rate	13.1	11.7

Causes of death are given below in order of frequency together with the number who died and the relative percentage of the total deaths. (242)

<u>Causes of Death Arranged in Order of Frequency</u>	<u>Number of Deaths</u>	<u>Percentages of Total Deaths</u>
Heart Disease (all forms)	85	35.1
Cancer (all forms, including 7 deaths from Lung Cancer)	44	18.1
Cerebrovascular Disease	42	17.4
Other Diseases of Circulatory System	15	6.2
All Other Accidents	10	4.1
Pneumonia	5	2.0
Other Diseases, Genito-Urinary System	5	2.0
Other Diseases of Digestive System	4	1.7
Diabetes Mellitus	3	1.3
Influenza	3	1.3
Bronchitis and Emphysema	3	1.3
Other Diseases of Respiratory System	3	1.3
Motor Vehicle Accidents	3	1.3
Peptic Ulcer	2	0.8
Suicide and Self Inflicted Injuries	2	0.8
Other Diseases of Nervous System	2	0.8
Other Infective and Parasitic Diseases	1	0.4
Other Tuberculosis	1	0.4
Asthma	1	0.4
Intestinal Obstruction and Hernia	1	0.4
Cirrhosis of Liver	1	0.4
Nephritis and Nephrosis	1	0.4
Diseases of Musculo-Skeletal System	1	0.4
Congenital Anomalies	1	0.4
Other Causes of Perinatal Mortality	1	0.4
Symptoms and Illdefined Conditions	1	0.4
All Other External Causes	1	0.4

NATIONAL HEALTH SERVICE ACT, 1946 - Section 21

Health Centres

The County Council has agreed in principle to the erection of a Health Centre in Llandrindod Wells and enquiries were being made during the year as to the possibility of siting this at or near Llandrindod Wells Hospital.

CARE OF MOTHERS AND YOUNG CHILDREN - Section 22

There were no maternal deaths in the county in 1970.

Infant Mortality

<u>Area</u>	<u>No. of Deaths</u> <u>under 1 year</u>	<u>Rates per 1,000 births</u>	
	<u>1970</u>	<u>1970</u>	<u>1966-70</u>
Urban Districts:			
Knighton	1	26	12
Llandrindod Wells	-	-	11
Presteigne	1	59	11
Rural Districts:			
Colwyn	-	-	20
Knighton	-	-	22
New Radnor	1	53	22
Paincastle	-	-	-
Rhayader	-	-	21
Urban Districts	2	17	13
Rural Districts	1	8	17
Administrative County	3	13	16

Congenital Defects

Notifications received of congenital defects apparent at birth numbered three. (3) Initial information is obtained from the birth card. These births are notified to the Registrar General and also placed on the "At Risk" Register.

Premature Infants

During the year twenty-two premature babies were born, all of them in hospital. Two babies born in hospital died, one within twenty-four hours, who weighed 3 lbs. 4 ozs., and one died at 14 days old and weighed 3 lbs. 7 ozs. The remaining twenty born in hospital survived and are doing well.

The premature baby rate per 1,000 live births was 92; the rate in 1969 was 63.

Child Health Clinics

Child Health Clinics are held in the county as follows:

<u>Place</u>	<u>Time</u>	<u>Medical Officer</u>
Knighton Health Clinic	1st Tuesday in month, 2.30 p.m.	Dr. J.G. Garman
Llandrindod Wells County Hall Clinic	2nd & 4th Tuesday in month, 2.30 p.m.	Dr. M.D. Owen
Newbridge-on-Wye P.O.W. Hut	1st Tuesday in month, 3.0 p.m.	
New Radnor Walton Village Hall	3rd Monday in month, 2.30 p.m.	Dr. R.J. Walker
Presteigne Health Clinic	2nd Tuesday in month, 2.30 p.m.	Dr. R.J. Walker
Rhayader Health Clinic	2nd Wednesday in month, 2.0 p.m.	Dr. B. Davies

Prevention of illness is the aim of the Child Health Clinics.

Advice to mothers on feeding, child behaviour, and on problems associated with the early stages of child development is given, and helps to free the parents from many of their worries. Such clinics, therefore, undertake a number of useful functions and these, to some extent, relieve the work of the general practitioner service.

Sessions held in 1970

	Knighton	Llandrindod Wells	Presteigne	Newbridge-on-Wye	New Radnor	Rhayader	Total
No. of meetings:	12	24	12	12	12	12	84
No. of children who attended during the year and who were born in:							
1970	28	71	23	7	15	25	169
1969	35	92	26	11	17	21	202
1965-68	48	101	43	21	31	47	291
Total no. of children who attended during the year:	111	264	92	39	63	93	662
No. of sessions held by general practitioners:	12	24	11	-	11	12	70
No. of children referred elsewhere:	4	2	1	-	-	2	9
No. of sessions held by Health Visitors without Doctor:	-	-	-	12	-	-	12
No. of children on "at risk" register at end of year:	12	38	17	7	3	14	91

Family Planning Clinic

This Clinic, which is run directly by the County Council with Dr. Beryl Davies as the Medical Officer in charge, is held on the second and fourth Mondays in each month.

There is no restriction at the Clinic in regard to those who are entitled to receive advice, which is always free. Unmarried, as well as married women, are entitled to have this advice but appliances are only provided free of charge when they are required for reasons of health.

40 new patients attended during the year and the total attendances made were 210. 101 cervical smears were taken. In addition, women were taught self examination of the breast for the early detection of breast cancer.

Unmarried Mothers and Their Children

The Swansea and Brecon Diocesan Moral Welfare Association undertake the care of unmarried mothers in this area and the Local Health Authority makes an annual grant to the Association towards the support of this work.

Miss E.M. Lewis, the Association's Moral Welfare Worker submits the following report on her work in Radnorshire during 1970.

"54 new cases were dealt with during 1970.

4 previously reported cases still needing after-care and supervision.

Of the Above:

- 11 were unmarried mothers.
- 12 were putative fathers.
- 13 were children.
- 17 were couples seeking advice on adoption.
- 1 matrimonial.

Unmarried Mothers:

- 2 to Mother and Baby Home, 1 paying her own fees.
- 3 were cared for by relatives.
- 6 remaining at home and all necessary help and advice was given to them, several visits were made to the Radnorshire area.

All mothers-to-be were visited in their own homes and the problem was discussed with their parents.

Putative Fathers:

All visited within the Radnorshire and surrounding area.

- 4 supporting their children through Court or Private agreements.
- 7 admitted paternity and agreed to the child being placed for adoption.
- 1 denied paternity.

Children:

- 8 remained with their mothers.
- 4 were placed for adoption, and in each case were fostered with registered foster mothers to date of placement, to enable mothers to have ample time to make the right decision.
- 1 baby died at birth.

Prospective Adopters:

All were visited and the subject of adoption was fully discussed. 4 babies placed for adoption, now legalised. All necessary visits were made during probationary period prior to legalisation. Prospective adopters were advised on all matters including Court procedure.

Matrimonial:

Woman concerned was visited, husband has now returned to legal wife.

After-Care:

All cases were visited, and advised where necessary. Also grants obtained for the mother with twins; grandparents bringing up daughter's illegitimate child. Payments made from putative fathers, in one case, periodically.

Most cases were time-consuming, but the help given was appreciated by those in trouble.

I am grateful for the excellent co-operation I received from the Health Department, Children's Department, hospital staff and local doctors, and also from Ministers of Religion in the various Radnorshire parishes. This certainly helps to lighten the burden of my work."

Dental Care of Expectant and Nursing Mothers

Mr. P.G.H. Griffith, the County Dental Officer, submits the following report:

"Expectant and nursing mothers do not use the service to any great extent.

The short annual visits of the dental surgeon to each area, do not necessarily correspond with the needs of the area, and transport difficulties do not encourage visits to the central clinic.

Mothers are encouraged to bring the pre-school children to routine school inspections but many find this difficult.

The appointment of an additional dental officer will allow for more frequent visits and should improve the situation."

DENTAL SERVICES FOR EXPECTANT AND NURSING MOTHERS AND CHILDREN
UNDER 5 YEARS

<u>Part A. Attendance & Treatment</u>	<u>Children</u> <u>0-4 years</u> <u>inclusive</u>	<u>Expectant</u> <u>& Nursing</u> <u>Mothers</u>
No. of visits for treatment during year:		
First Visit	18	3
Subsequent Visits	4	6
Total Visits	<u>22</u>	<u>9</u>
No. of additional courses of treatment other than the First Course commenced during year:	3	4
Treatment provided during the year:		
No. of fillings	5	5
Teeth extracted	3	1
General anaesthetic given	-	-
Emergency visits by patients	6	3
Patients x-rayed	-	1
Patients treated by scaling and/or removal of stains from the teeth	8	3
Teeth otherwise conserved	29	-
Teeth root filled	-	-
Inlays	-	-
Crowns	-	-
No. of courses of treatment completed during the year:	21	7

Part B. Prosthetics

No dentures were provided.

Part C. Anaesthetics

No General Anaesthetics were administered by or for the Dental Officer.

Part D. Inspections

No. of patients given first inspection during the year	33	3
No. of patients who required treatment	18	3
No. of patients who were offered treatment	18	3

Part E. Sessions

No. of Dental Officer Sessions (i.e. equivalent complete half days) devoted to maternity and child welfare patients:

For Treatment	6
For Health Education	6

DISTRIBUTION OF WELFARE FOODS

<u>Issued During</u> <u>the Quarter</u> <u>Ended:</u>	<u>National</u> <u>Dried Milk</u>		<u>Cod Liver</u> <u>Oil</u>		<u>Vitamin</u> <u>A & D</u>		<u>Orange</u> <u>Juice</u>	
	<u>No. of Pkts.</u>		<u>No. of Btls.</u>		<u>No. of Pkts.</u>		<u>No. of Btls.</u>	
	1960	1970	1960	1970	1960	1970	1960	1970
March 31st	2,856	1,203	261	36	98	39	1,439	790
June 30th	3,001	1,088	205	20	107	17	1,738	950
September 30th	2,724	913	194	19	112	18	1,598	803
December 31st	2,721	946	232	27	87	13	1,443	743
	11,302	4,150	892	102	404	87	6,218	3,286

During the past ten years 1960-70 there has been a decreasing number of families taking advantage of the Welfare Foods Scheme, i.e. National Dried Milk, 7,152 packets less; Cod Liver Oil, 790 bottles less; Vitamin A & D Tablets, 317 packets less and Orange Juice, 2,932 bottles less.

NURSING SERVICES - Sections 23, 24 & 25

Health Visiting

Routine visiting of all children under 5 years of age includes testing of urine for Phenylketonuria. This year the technique has been changed at the request of the Welsh Office. The new test is known as the Woolf Test, and is a test for various conditions, whereas the **Phenistix** test was for Phenylketonuria only.

Despite the many changes taking place, the Health Visitor must still continue to play a vital part in maintaining the health and well-being of the community. The Health Visitor together with the general practitioner will still form the first line of defence against disease and the first line of support to families in need.

Health education is an important aspect of the work of the Health Visitor, and we hope in the future to build up this part of the work.

Midwifery

The number of midwifery deliveries at Knighton Hospital still remains high - there being 67 in the year under review.

The District Nurse/Midwives and general practitioners work in close co-operation with the staff of the hospital, thus ensuring a good service for the mothers.

The lack of midwives is still a cause for concern, especially that now more and more mothers with their babies are wishing for early discharge from hospital.

Ante natal care to all mothers whether for home or hospital delivery, is carried out by the domiciliary staff at the general practitioners' ante-natal clinics, defaulters being followed up in their own homes.

The Parentcraft and Group Teaching Classes continue and are greatly appreciated.

Home Nursing

The District Nurses continue to give a good service to the community, meeting the changing needs of the sick in their own homes.

The responsibility of the District Nursing Sisters include nursing, teaching of the relatives to care for their loved ones between Sisters' visits, maintenance of good nursing standards.

Rehabilitation is an important part of daily care of patients and this is time consuming.

Nursing of the aged takes up a large portion of the Sister's day. To the old she is a very dear friend.

A general practitioner/District Nursing Sister attachment has been in force for a period of time, the Sister undertaking the work of the general practitioner regardless of the geographical area. This has proved beneficial to patients, doctor and Sister.

Nursing Equipment

There is now a very comprehensive supply of equipment, varying from fracture boards, Ripple bed, special bed for tetraplegics to walking sticks.

Statistics on Work of the Nursing Staff

Work of the County Nursing Officer

No. of routine inspections of nurses	43
No. of special visits to nurses	48
No. of other visits	121
No. of visits to nursing homes	7
No. of visits to hospital	28
No. of visits to child health clinics	14
No. of visits to home helps	73

Home Nursing

No. of new patients visited	837
Total no. of nursing visits	25,162

Midwifery

No. of cases attended	80
No. of maternity and midwifery visits	1,185
Visits made to cases where the birth occurred in hospital but where the mother and child were discharged home before the tenth day	612
No. of attendances at medical practitioners' ante-natal clinics	223

Health Visiting

No. of children visited who were aged between 0-5 years	1,096
No. of visits made to the above children	3,696
No. of visits to physically handicapped persons	137
No. of visits to tuberculous patients	29
No. of visits to persons over 65 years of age	698
No. of other visits	457
No. of talks given on health education	57
No. of attendances at Parentcraft and Group Teaching Classes	49
No. of visits to expectant mothers	10

Mental Health

No. of visits to patients	469
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Clinics

No. of attendances at Child Health Clinics	156
No. of attendances at general practitioners' baby clinics	210
No. of attendances at National Insurance and Ophthalmic Sessions	35
No. of attendances at Immunisation Sessions (at home and specials)	8

NATIONAL HEALTH SERVICE ACT, 1946

VACCINATION AND IMMUNISATION - Section 26

The following is a summary of the numbers of children vaccinated or immunised during 1970 including re-inforcing injections:

Completed Primary Courses

Type of Vaccine or Dose	Year of Birth					Others Under Age 16	Total
	1970	1969	1968	1967	1963-66		
Diphtheria	31	152	46	7	27	-	263
Whooping Cough	31	142	44	7	12	-	236
Tetanus	31	153	47	10	30	26	297
Oral Poliomyelitis	30	142	56	3	25	-	256
Measles	-	6	3	2	6	-	17

Re-inforcing Doses

Diphtheria	-	12	34	6	69	6	127
Whooping Cough	-	12	31	3	18	2	66
Tetanus	-	12	34	6	70	30	152
Oral Poliomyelitis	-	21	31	5	53	5	115

Smallpox Vaccination

	Age at Date of Vaccination							Total
	0-3 mths.	3-6 mths.	6-9 mths.	9-12 mths.	1 yr.	2-4 yrs.	5-15 yrs.	
No. vaccinated	-	-	8	6	59	37	8	118
No. re-vaccinated	-	-	-	-	-	1	3	4

Statistical Summary of Vaccination and Immunisation

	Children Born in 1969			Smallpox (Children under 2)
	<u>Whooping Cough</u>	<u>Diphtheria</u>	<u>Poliomyelitis</u>	
England & Wales	78%	80%	79%	34%
Wales	73%	74%	71%	21%
Radnor	*107%	*108%	78%	31%

*The reason for the percentage being over a 100% under Whooping Cough and Diphtheria is that during the year a number of families moved into the County, the children having been vaccinated elsewhere. The figures are based on the 1969 Birth Rate.

NATIONAL HEALTH SERVICE ACT, 1946 - Section 27

AMBULANCE SERVICE

Statistics for ambulance vehicles for 1970 are as follows:

<u>Ambulance</u>	<u>No. of Journeys</u>	<u>Mileage</u>	<u>Type of Case</u>	
			<u>Illness</u>	<u>Accident</u>
Knighton	110	7,214	97	13
Llandrindod Wells	266	9,989	237	31
Presteigne	109	5,583	105	9
Rhayader	103	5,655	81	22
	588	28,441	520	75

Total Annual Mileage:

<u>Year</u>	<u>Ambulances</u>	<u>Sitting-case cars</u>	<u>All Vehicles</u>	<u>Increase or Decrease on previous year (per cent)</u>
1961	20,452	162,795	183,247	+13.9
1962	21,641	168,732	190,373	+ 3.9
1963	21,704	179,678	201,382	+ 5.8
1964	23,811	206,837 $\frac{1}{2}$	230,648 $\frac{1}{2}$	+14.5
1965	24,080	227,873 $\frac{1}{2}$	251,953 $\frac{1}{2}$	+ 8.5
1966	24,370	236,801 $\frac{1}{2}$	261,171 $\frac{1}{2}$	+ 3.7
1967	25,392	239,607 $\frac{1}{2}$	264,999 $\frac{1}{2}$	+ 1.5
1968	25,841	252,197 $\frac{1}{2}$	278,038 $\frac{1}{2}$	+ 5.3
1969	24,806	256,860	281,666	+ 1.3
1970	28,441	262,452	290,893	+ 3.3

In 1970 ambulance vehicles did 1,530 miles per 1,000 of the population compared with 1,357 miles in 1969, while sitting-case cars covered 14,123 miles per 1,000 of the population as against 14,175 in 1969. The number of journeys per 1,000 of the population made by ambulance vehicles was 32 compared with 26 in 1969, and by sitting-case cars 292 compared with 299 in the preceding year. The total number of journeys undertaken by sitting-case cars was 5,417 as against 5,448 in 1969.

The statistics continue to show the inevitable increase both in journeys and mileage which is largely attributable to the geographical situation of the county and the centralisation of hospital services. It is significant that the average mileage per journey undertaken by ambulance vehicles during the year was 48.3 miles and by sitting-case cars 48.4 .

The new Land-Rover ambulance, with Lomas built body, was delivered to the Presteigne Ambulance Station in September and the former Presteigne ambulance, a Ford, transferred to Llandrindod to become the second-line vehicle. The previous second-line vehicle was sold to the Llandrindod Wells Branch of the St. John Ambulance Brigade to be used for training purposes and as a mobile first-aid post.

Additional items of equipment have been purchased for use in the ambulance vehicles including such equipment as Ambu sucking pumps, artificial airways, inflatable splints, additional and increased capacity oxygen cylinders and various first-aid equipment.

Land-Rover ambulances already in use were fitted with servo-assisted brakes.

During the year ambulance vehicles, with the exception of the second-line vehicle, were equipped with Pye "Westminster" radio-telephones. There have been considerable difficulties however in laying the land-line which the Radnorshire and North Breconshire Water Board and ourselves require to connect the remote control units in the Water Board Headquarters and the Central Ambulance Control (the Llandrindod Wells Hospital) with the transmitter on Black Mixen. At the end of the year the difficulties experienced by the General Post Office remained unresolved.

I am grateful to all personnel who have contributed to the smooth running of both the ambulance and sitting-case car services.

TUBERCULOSIS

The following statistics have been supplied by the Chest Physician:

	<u>1966</u>	<u>1967</u>	<u>1968</u>	<u>1969</u>	<u>1970</u>
No. of cases notified:	2	1	2	2	2
No. of cases transferred into the county:	3	-	3	-	1
No. of contacts examined:	7	27	23	8	7
No. of contacts given B.C.G.:	4	11	10	2	2

The total number of patients referred for the first time to Llandrindod Wells Clinic during 1970 was 287.

The total number of attendances at the Llandrindod Wells Chest Clinic during 1970 was 495.

The following table shows the number of tuberculous cases on the register at the end of the year:

<u>Age Periods</u>	<u>Respiratory</u>		<u>Non-Respiratory</u>		<u>All Forms</u>	
	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>
0-	-	-	-	-	-	-
1-	-	-	-	-	-	-
2-	-	-	-	-	-	-
5-	-	-	-	-	-	-
10-	-	-	-	-	-	-
15-	-	1	-	-	-	1
20-	-	-	-	-	-	-
25-	-	-	-	-	-	-
35-	1	1	-	-	1	1
45-	1	1	-	1	1	2
55-	2	-	1	2	3	2
65-	1	-	1	-	2	-
75+	1	1	-	1	1	2
Total	6	4	2	4	8	8

The following table shows the number of new cases and of deaths from tuberculosis during the year:

<u>Age Periods</u>	<u>New Cases</u>				<u>Deaths</u>			
	<u>Respiratory</u>		<u>Non-Respiratory</u>		<u>Respiratory</u>		<u>Non-Respiratory</u>	
	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>
0-	-	-	-	-	-	-	-	-
1-	-	-	-	-	-	-	-	-
2-	-	-	-	-	-	-	-	-
5-	-	-	-	-	-	-	-	-
10-	-	-	-	-	-	-	-	-
15-	-	1	-	-	-	-	-	-
20-	-	-	-	-	-	-	-	-
25-	-	-	-	-	-	-	-	-
35-	-	-	-	-	-	-	-	-
45-	-	-	-	-	-	-	-	-
55-	1	-	-	-	-	-	-	-
65-	-	-	-	-	-	-	-	-
75+	-	1	-	-	1	-	-	-
Total	1	2	-	-	1	-	-	-

B.C.G. VACCINATION

The scheme for the protection of children against tuberculosis by B.C.G. vaccination continued, to include the following groups:

1. School children approaching the age of 13 who could conveniently be vaccinated with others of between 13 and 14 years of age.
2. 13-14 year old children.
3. Children of 14 years of age or older not previously protected.

The results of the scheme during the year were as follows:

	<u>Groups</u>			
	(1)	(2)	(3)	<u>Totals</u>
No. of children eligible	15	197	75 (2)	287 (2)
No. of consents	15	173	64 (2)	252 (2)
No. of parents refused	-	24	11	35
No. found to be negative reactors and vaccinated	7	159	48 (2)	214 (2)
No. found to be tuberculin positive	-	2	1	3

CHIROPODY SERVICE

Mr. J. Selwyn Jose, the County Chiropodist, submits the following report:

"There are at the moment nine separate clinics being run in the county, compared with ten in 1969. The Llangunllo clinic was closed and the patients were brought into the Knighton clinic, because of the resignation of the voluntary helpers, Mr. and Mrs. Parker. The Llanbister clinic was also closed, and the patients are now being treated at the Llanddewi clinic which is held in the village hall.

1970 has seen a big increase in domiciliary patients, also an increase in the clinic numbers. There are now approximately 600 patients in Radnorshire.

I would like to thank the ladies that give me help in five of the nine clinics.

The number of treatments given to patients in 1970 is as follows:-

Clinics	1,996
Domiciliaries	867
Old People's Homes	400
TOTAL	3,263

It is expected that a room will be provided in the County Hall in the near future for the sole use of the chiropody service. This will enable the service to be run more smoothly and independently.

There has been good co-operation from the district nurses and the health visitors and this has been a great help both to the patients and to the running of the service."

HEALTH EDUCATION

During 1970 sex education was offered to the primary schools. Early in the year the two film strips produced by the B.B.C. - "Where Do Babies Come From?" and "Growing Up" - were shown to the Education Committee and the Nursing Staff. Most of the nurses with children felt that the suggested age of 8 - 9 was too low and preferred 10 - 11. Following this every primary school was visited and the head teachers asked if they would like the assistance of a health visitor in putting on a programme. Reactions varied from a grateful welcome to frank disapproval.

Meetings of parents have been held to show the film strips, with lively discussions following. Generally speaking the urban areas are in favour of their children seeing the film strips at the age 8 - 9, while rural areas are not in favour of sex education in the primary schools. During 1971 the film strips will be shown to the children whose parents desire it.

Talks and film strips continue to be used in the secondary schools successfully. The wider aspects of responsibility to the community is tackled as well as sex education in forms 3 and 6. The dangers of smoking and drug-taking were included.

HOME HELP SERVICE - Section 29

The number of visits paid in connection with the Home Help Service was 890. 124 households were supplied during the year with a home help, and at present there are 90 home helps employed by the Authority.

The Health Visitors and District Nurses continue to help in the day-to-day running of the Service.

MENTAL HEALTH SERVICES

Domiciliary care of mentally disordered persons including mentally subnormal people is undertaken by the Health Visitors together with Mr. F.J. McDermott, our Mental Welfare Officer. In addition, Mr. H.E. Morris of Knighton, and all the whole-time District Nurses have been appointed as Mental Welfare Officers to act when required in an emergency.

Domiciliary visiting of the 45 mentally subnormal persons in the County is undertaken as in previous years by the Health Visitors and they, as Mental Welfare Officers, also visit mentally disordered persons in the community.

Three boys and three girls from Radnorshire attended the Brecon Junior Training Centre during the year.

We are very grateful to Breconshire for this service. Several voluntary committees are now running in the county and are able to do a considerable amount to entertain the mentally subnormal people in their areas.

Dr. G. Diggle, the Medical Superintendent of the Mid-Wales Hospital, who holds a psychiatric clinic every Friday at the County Hall Clinic, Llandrindod Wells, submits the following report:

"Patients requiring in-patient treatment for mental illness are in the main admitted to the Mid-Wales Hospital, Talgarth, but those from the Presteigne area are admitted to St. Mary's Hospital, Burghill. Patients suffering from subnormality who require hospital care go to the appropriate hospital of the North Wales Group based upon Bryn-y-Neuadd, Llanfairfechan.

A weekly outpatient clinic is held at Llandrindod which serves most of the County and North Breconshire. Out-patients from South Radnorshire are seen at Talgarth or Brecon at both of which, weekly clinics are held. There is no waiting list for out-patient appointments.

The figures for the Llandrindod Clinic are:-

No. of new cases seen during 1970	135
No. of clinic sessions	50
Total attendances during 1970	673

As regards admission to the Mid-Wales Hospital, there is no difficulty about the admission of non-senile cases. Admission can be arranged as urgently as is necessary, and there is no waiting list.

Patients suffering from senile confused states are, however, a very different problem. As far as female patients are concerned, a very tough admission policy has developed by force of circumstances and this is beginning to occur for male patients. The great majority of beds in the Mid-Wales Hospital that can be staffed to give full nursing care for twenty-four hours a day are occupied by patients suffering from senile mental illness and the hospital has reached the stage where no more such cases can be taken in than are discharged, which, for practical purposes, means by death. This problem is getting steadily worse and it is only a matter of time before the shortage of beds for this type of case causes a tragedy. The solution, as far as Talgarth is concerned, is not more beds, but a very great (100%) increase in nursing staff.

Facilities for child psychiatry in Radnorshire are limited and as a purely personal expression of opinion, the County may be none the worse for that.

Subnormality services are provided by Dr. Craft from Llanfairfechan. Most of the difficulties in this sphere are due to lack of appropriate residential accommodation where home care is impossible. The best solution to this problem is anything but clear. Each solution has severe problems and disadvantages and the situation is not helped by the geographical problems of Mid-Wales.

I think that in Radnorshire, whenever a patient has presented a psychiatric problem, a reasonable solution has been provided expeditiously with the exception of the female patient with senile illness."

NATIONAL ASSISTANCE ACT, 1948 - Sections 29 & 30

Welfare of the Blind and Partially Sighted

Eight new cases (2 men and 6 women) were registered as blind and four new cases (2 men and 2 women) registered as partially sighted. At the end of the year there were 54 persons (27 men and 27 women) registered as blind and 18 persons (7 men and 11 women) registered as partially sighted.

During the year there were 7 deaths (2 men and 5 women) of persons who were registered as blind.

Mrs. C.H. Medlicott, J.P., Honorary Secretary of the Radnor Association for the Blind, submits the following report:

"A very good year financially and socially. Many holiday grants had been given.

The 'get togethers' were very popular and well attended. We had one at Bleddfa Forest Inn in June, and the second at the Hotel Metropole, Llandrindod Wells, which took place on the 5th December and was a Christmas party.

The annual outing to Aberystwyth was very much enjoyed, each blind person receiving £1 for meals, which was much more appreciated than all attending together at one hotel.

Gifts of Horlicks, Marmite and Bovril were given during the year to many blind people. Also gifts of £6 and £5 each were given at Christmas.

Wool was available at cost price to the blind, and many took advantage of it."

Mr. R.A. Oldbury, our Home Teacher of the Blind, submits the following report on his work:

"I spent the first five weeks of 1970 at Manor House, Torquay, the R.N.I.B.'s rehabilitation centre for newly-blinded persons. I was undertaking an extensive course of mobility and orientation based on long cane techniques. I undertook this training for two reasons. Firstly because I believed that it would add to my own mobility, and secondly I was being asked so many questions by other blind people concerning long cane training I knew the only way to be able to answer their questions authoritatively was to undertake such a course. The instruction I received was extremely good and I returned home with a greater knowledge of up-to-date mobility and orientation training.

All blind and partially-sighted people, including those in Part III accommodation and in hospital, were visited regularly during the year.

One man received instruction in Braille and one man commenced instruction in Moon.

A group holiday was arranged for early June which proved to be a success in every way.

The talking-book service continues to be a great success. The number of machines now in use total 25, all machines being maintained by Mr. Ken Howarth, who accepts no payment for this service.

During the year we started two new activities for the blind in Llandrindod Wells. One is an evening social group held every Friday evening from 6 p.m. until 9 p.m. Preliminary arrangements were made to form a group of 'The Blind Bowlers' Association'.

Handicraft classes for blind and physically handicapped in Knighton and Llandrindod Wells continue to be well attended. The goods produced, as in previous years, were sold at the Royal Welsh Show, Newbridge-on-Wye and Knighton Shows."

Physically Handicapped Persons

The following table shows the number of physically handicapped persons on the register at the end of the year:-

	<u>M</u>	<u>F</u>	<u>Total</u>
Group "A" (Capable of work under ordinary industrial conditions)	11	2	13
Group "B" (Incapable of work under ordinary industrial conditions but capable of work in sheltered workshops)	5	1	6
Group "C" (Capable of work at home only)	9	32	41
Group "D" (Incapable of or not available for work)	22	21	43
Group "E" (Children under the age of 16 years)	2	1	3
	<u>49</u>	<u>57</u>	<u>106</u>

The following table shows the age groups of the 106 persons on the register of physically handicapped persons:-

	<u>M</u>	<u>F</u>	<u>Total</u>
0 - 15	2	1	3
16 - 19	-	-	-
20 - 29	6	2	8
30 - 39	1	3	4
40 - 49	5	5	10
50 - 59	8	9	17
60 - 69	14	16	30
70 - 79	8	14	22
80 - 89	5	6	11
90+	-	1	1
	<u>49</u>	<u>57</u>	<u>106</u>

The following table shows the classification of physically handicapped persons and the number registered according to their disability.

		Group					Total
		"A"	"B"	"C"	"D"	"E"	
A/E	Amputation	3	-	2	4	-	9
F	Arthritis and Rheumatism	-	-	23	22	-	45
G	Congenital malformations and deformities	-	-	1	1	1	3
H/L	Diseases of digestive system, genito-urinary, heart or circulatory and respiratory systems (other than tuberculosis) and diseases of the skin	-	-	-	4	-	4
Q/T	Injuries of the head, face, neck, thorax, abdomen, pelvis or trunk. Injuries or diseases (other than tuberculosis) of upper and lower limbs and of the spine	-	-	2	1	1	4
V	Organic nervous diseases	8	4	10	9	1	32
U/W	Neurosis, psychoses, and other nervous and mental disorders not included in "V"	-	2	1	1	-	4
X	Tuberculosis (respiratory)	-	-	-	-	-	-
Y	Tuberculosis (non-respiratory)	2	-	-	-	-	2
Z	Diseases and injuries not specified above	-	-	2	1	-	3
		13	6	41	43	3	106

Mr. E.F. Frost, the Honorary Secretary of the Radnorshire Association for the Disabled, submits the following report:

"During 1970, the Association has continued its normal activities in organising outings and social gatherings for the disabled, but an important extension of its work has been an effort to provide amenities and comfort to those disabled persons who are virtually housebound and so are unable to take part in organised social activities. This widening of the scope of the Association's work has been made possible largely through a generous increase in the grant received from the Welsh Church Acts Fund.

Rented television sets have been installed in a number of homes, storage room for invalid chairs has been provided and, in other cases, special articles of furniture and equipment have been supplied to make life a little easier and more enjoyable for these unfortunate people.

Social activities have included trips to Bristol Zoo and Aberystwyth in the summer, in addition to the now established visit to the Pantomime at Llandrindod followed by entertainment at the Rock Park Hotel. A grant was also made towards the expenses of the summer holiday for disabled people at Porthcawl.

An important event of the year was the passage through Parliament of the Disabled Persons Act, 1970, making further provision for the welfare of the disabled and conferring additional powers and duties on local authorities. The Association looks forward to future co-operation with the Social Services Committee of the County Council and with the newly-appointed Director of Social Services.

Finally, the Association is deeply grateful to all those who have supported its work during the year by financial help, by organising fund-raising efforts, or by personal service. The Committee also wishes to thank its Chairman, Miss D.A. Payne, M.B.E., for the additional work she undertook for several months during the absence abroad of the Honorary Secretary."

Mrs. P. Richards, our Craft Instructress, submits a report as follows:

"Occupational therapy classes are continuing in the three centres, Knighton, Presteigne and Llandrindod Wells, and the numbers attending are increasing. The stand at the Royal Welsh Show, once again, proved very successful.

In September this year a party of forty handicapped persons and helpers participated in the annual holiday for the handicapped of Radnorshire which was spent at 'The Rest Convalescent Home', Porthcawl, and despite inclement weather was thoroughly enjoyed by all."

WELFARE OF THE DEAF

Deaf and partially-hearing people in this County are visited regularly by the Chester and North Wales Society for the Deaf who undertake welfare work for our deaf people on behalf of the County Council. The Society makes regular reports to the Health Department following the visit by one of their welfare workers. For this service the County Council makes an annual grant to the Chester and North Wales Society for the Deaf.

At the end of the year 56 persons were registered as deaf (with and without speech) or hard of hearing, of this number 37 (66.1%) were over the age of 65 years. The number on the register was as follows:

	<u>Children</u> <u>under 16 yrs.</u>		<u>Persons</u> <u>aged 16-64 yrs.</u>		<u>Persons</u> <u>aged 65 yrs. & over</u>	
	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>
Deaf with speech	-	2	3	-	2	3
Deaf without speech	1	1	2	1	1	-
Hard of hearing	-	1	1	7	10	21
Total	1	4	6	8	13	24

INFECTIOUS DISEASES

The following 128 cases of notifiable infectious diseases were notified during the year by the District Medical Officers of Health to the County Medical Officer.

Disease	Knighton	Llandrindod Wells	Presteigne	Total Urban	Colwyn	Knighton	New Radnor	Painscastle	Rhayader	Total Rural	Total County
Infective Hepatitis	-	-	5	5	-	-	-	-	-	-	5
Measles	52	-	30	82	2	30	-	-	-	32	114
Salmonella	-	-	-	-	-	2	-	-	-	2	2
Scarlet Fever	-	-	-	-	-	6	-	-	-	6	6
Tuberculosis (Respiratory)	-	-	-	-	-	-	-	-	1	1	1

VENEREAL DISEASE

Patients in need of treatment are referred to clinics at Hereford or Shrewsbury.

Statistics are as follows:

Syphilis	cases	-
	attendances	-
Gonorrhoea	cases	3
	attendances	3
Other Conditions	cases	6
	attendances	6

No information has been received of any contacts of any cases in this County. In view of the very low incidence of these diseases in Radnorshire no campaign to educate the public on the dangers of venereal disease has been undertaken.

TABLE I

Causes of Death in Administrative Areas in the County of Radnor for 1970.

Causes of Death	Urban Districts				Rural Districts				County		T O T A L							
	Knighton		Llandrindod Wells		Presteigne		Colwyn		Knighton			New Radnor		Painscastle		Rhayader		
	M	F	M	F	M	F	M	F	M	F		M	F	M	F	M	F	
Other Tuberculosis:							1										1	1
Other Infective & Parasitic Diseases:					1												1	1
Malignant Neoplasm:stomach:	1								1		1						3	3
Malignant Neoplasm:larynx:											1						1	1
Malignant Neoplasm:intestine:		1	1				1	1	1	1			1	1	1		4	5
Malignant Neoplasm:lung,bronchus:					1				1		1			4			7	7
Malignant Neoplasm:breast:				2											1		3	3
Malignant Neoplasm:prostate:												1		2			3	3
Other Malignant Neoplasms etc:				4	1	1	1		2	1		1	2	1	3	5	12	17
Leukaemia:	1																1	1
Diabetes Mellitus:					1				1						1	1	2	3
Other Diseases of Nervous System etc:							1				1					2		2
Chronic Rheumatic Heart Disease:				2											1	1	2	3
Hypertensive Disease:		1	1	1					1	1					1	2	4	6
Ischaemic Heart Disease:	1	1	8	7			4	2	9	6	3	2	3	3	9	4	37	25
Other Forms of Heart Disease:				1			2		1		1		1		3	2	6	8
Cerebrovascular Disease:	3	7	1	4					3	8	2	1	1	1	6	4	16	26
Other Diseases of Circulatory System:	2	4	1	2					1	1	1	1		1	1	5	10	15
Influenza:	1						1								1	2	1	3
Pneumonia:	1		1				1								1	1	3	5
Bronchitis & Emphysema:	1	1	1													2	1	3
Asthma:										1							1	1
Cirrhosis of Liver:	1															1		1
Other Diseases of Respiratory System:													2	1		1	2	3
Peptic Ulcer:				1						1						1	1	2
Other Diseases of Digestive System:	1		1										1		1	2	2	4
Intestinal Obstruction & Hernia:													1			1		1
Other Diseases,Genito-Urinary System:	1			1											1	2	3	5
Nephritis & Nephrosis:							1										1	1
Diseases of Musculo-Skeletal System:									1								1	1
Congenital Anomalies:															1	1		1
Other Causes of Perinatal Mortality:	1																1	1
Motor Vehicle Accidents:	2	1															2	1
Symptoms & Ill-defined Conditions:	1																1	1
All Other Accidents			2	2	1	1					1			2	1	5	5	10
Suicide & Self-Inflicted Injuries:						1							1			1	1	2
All Other External Causes:									1								1	1
Total All Causes:	15	19	19	28	2	7	9	7	20	23	11	6	8	11	34	23	118	124

TABLE II

Causes of Death at the Various Periods of Life in the County of Radnor, 1970.

	<u>Aggregate of Urban Districts</u>													
	<u>Under 4 wks.</u>													
	<u>All 4 & under</u>													
	<u>Ages wks. 1 yr. 1-4 15- 25- 35- 45- 55- 65- 75 & over</u>													
	M F	M F	M F	M F	M F	M F	M F	M F	M F	M F	M F	M F	M F	M F
er Infective & Parasitic diseases:	1			1										
ignant Neoplasm:stomach:	1										1			
ignant Neoplasm:intestine:	1	1							1				1	
ignant Neoplasm:lung,bronchus:	1										1			
ignant Neoplasm:breast:		2										2		
er Malignant Neoplasms etc:	1	5						1	1	1		3		
kaemia:	1				1									
betes Mellitus:		1										1		
onic Rheumatic Heart Disease:		2									2			
ertensive Disease:	1	2											1	2
naemic Heart Disease:	9	8									2	1	2	2
er Forms of Heart Disease:	1	3												1
ebrovascular Disease:	4	12									2		3	4
er Diseases of Circulatory system:	3	6											1	1
luenza:	1	1										1		
umonia:	2	1										1		
nchitis & Emphysema:	2	1											2	
tic Ulcer:	1													1
rhosis of Liver:	1										1			
er Diseases of Genito-Urinary system:	1	1												1
er Diseases of Digestive system:	1	1											1	
er Causes of Perinatal Mortality	1		1											
ptoms and Ill-defined conditions:		1												1
or Vehicle Accidents:	2	1				1	1							1
Other Accidents:	2	3											2	1
al All Causes:	36	54	- 1	- 1	1	-	- 1	1	-	- 1	- 2	5	6	10

TABLE II

Causes of Death at the Various Periods of Life in the County of Radnor, 1970.

Causes of Death	Aggregate of Rural Districts													
	All	Under	4wks.		5-	15-	25-	35-	45-	55-	65-	75		
	Ages	4 wks.	-1yr.									ov		
	M F	M F	M F	M F	M F	M F	M F	M F	M F	M F	M F	M		
Other Tuberculosis:	1											1		
Malignant Neoplasm:stomach:	2										2			
Malignant Neoplasm:intestine:	3 4								1 1	2 1		1		
Malignant Neoplasm:larynx:	1													
Malignant Neoplasm:lung,bronchus:	6							2	1	2	1			
Malignant Neoplasm:breast:	1								1					
Malignant Neoplasm:prostate:	3										2	1		
Other Malignant Neoplasms etc:	4 7						1		2 2		1 1	1		
Diabetes Mellitus:	1 1								1 1					
Other Diseases of the Nervous System:	2	1								1				
Chronic Rheumatic Heart Disease:	1										1			
Hypertensive Disease:	1 2											1		
Ischaemic Heart Disease:	28 17								2	6 5	10 4	10		
Other Forms of Heart Disease:	5 5										1 2	4		
Cerebrovascular Disease:	12 14							1			4 4	8		
Other Diseases of Circulatory System:	2 4									1 1	3	1		
Influenza:	1													
Pneumonia:	1 1										1			
Asthma:	1													
Other Diseases of Respiratory System:	1 2									1		1		
Peptic Ulcer:	1													
Intestinal Obstruction & Hernia:	1										1			
Other Diseases of Digestive System:	1 1													
Congenital Anomalies:	1										1			
Nephritis & Nephrosis:	1													
Other Diseases of Genito-Urinary System:	1 2									1	1	1		
Diseases of Musculo-Skeletal System:	1									1				
Suicide & Self-Inflicted Injuries:	1 1								1 1					
All Other Accidents:	3 2					1								
All Other External Causes:	1													
Total All Causes:	82 70	1 -	- -	- -	- -	1 -	- 1	2 1	5 7	13 10	26 16	3		

TABLE III

Area	Live Births			Still Births	
	No. 1970	Birth Rates 1970	1966-70	No. 1970	Rates per 1,000 Live and Still Total Births
Urban Districts:					
Knighton	39	17.7	15.6	2	49.0
Llandrindod Wells	59	18.2	16.2	1	17.0
Presteigne	17	13.0	13.9	1	56.0
Rural Districts:					
Colwyn	19	11.7	12.1	1	50.0
Knighton	32	12.6	14.2	-	-
New Radnor	19	9.6	13.0	2	95.0
Paincastle	12	7.6	10.2	-	-
Rhayader	40	9.7	11.6	3	70.0
Urban Districts	115	17.0	15.5	4	34.0
Rural Districts	122	10.3	12.3	6	47.0
County	237	12.7	13.4	10	40.0

TABLE IV

Area	No. of Deaths 1970		Crude Death Rates 1970	
			1966-70	
Urban Districts:				
Knighton	34		15.5	13.5
Llandrindod Wells	47		14.5	16.4
Presteigne	9		6.9	10.9
Rural Districts:				
Colwyn	16		9.8	11.3
Knighton	43		16.9	13.1
New Radnor	17		8.6	9.7
Paincastle	19		12.1	11.2
Rhayader	58		14.1	13.5
Urban Districts	90		13.3	14.4
Rural Districts	153		12.9	12.2
County	243		13.1	13.1

TABLE III

Area	No. 1970	Birth Rates 1970 1966-70	No. 1970	Rate per 1,000 Live and Still Total Births
Urban Districts:				
Kington	38	17.7	5	49.0
Llantrisant Wells	58	18.3	1	17.0
Prosefyn	17	13.0	1	56.0
Rural Districts:				
Colwyn	19	11.7	1	50.0
Kington	38	15.6	1	52.0
New Radnor	15	13.0	1	70.0
Pontrilas	15	10.5	1	70.0
Rhydymyr	40	11.6	1	70.0
Urban Districts:				
Kington	38	15.7	6	50.0
Llantrisant Wells	58	15.7	6	50.0
Prosefyn	17	13.0	1	56.0

PART II

ANNUAL REPORT OF THE

PRINCIPAL SCHOOL MEDICAL OFFICER

TABLE IV

Area	No. of Deaths 1970	Grade Health Rates 1970 1966-70
Urban Districts:		
Kington	38	15.5
Llantrisant Wells	58	16.5
Prosefyn	17	10.9
Rural Districts:		
Colwyn	19	11.3
Kington	38	15.7
New Radnor	15	9.7
Pontrilas	15	11.5
Rhydymyr	40	13.5
Urban Districts:		
Kington	38	15.7
Llantrisant Wells	58	15.7
Prosefyn	17	13.1

ANNUAL REPORT OF THE

PRINCIPAL SCHOOL MEDICAL OFFICER

MEDICAL INSPECTIONS

During the year, 772 children were examined in the respective age groups compared with 679 in the previous year. In addition, 30 children were given special inspections.

There was a slight increase in the number of parents who attended the examinations of their children; the figure for this year being 46% compared with 39% in 1969.

CO-OPERATION WITH FAMILY DOCTORS

The recommendations of the Joint Committee of the British Medical Association and the Society of Medical Officers of Health were followed as in previous years, with regard to children found at school medical examinations to be suffering from defects other than defects of refraction. A letter about such children is sent from the Principal School Medical Officer to the family doctor concerned.

PRINCIPAL FINDINGS AT MEDICAL INSPECTIONS

Infestation

The number of children whose heads were found to be infested with lice was 3 compared with 6 for 1969 and the percentage of children found to be so infested was 0.3.

The actual numbers of children found to be infested during the last ten years are given below:

1961	.....	71	1966	.....	6
1962	.....	66	1967	.....	24
1963	.....	37	1968	.....	9
1964	.....	17	1969	.....	6
1965	.....	26	1970	.....	3

Teeth

Advice on the prevention of dental decay was again given at medical inspections, and leaflets were handed to the parents when necessary.

Eyes

Every child has his or her vision tested every year.

Seventeen school entrants and fifty-six children of the other age groups were found to be suffering from defective vision. All were referred for refraction to the School Ophthalmic Surgeon. Fifty-one other children with defective vision were kept under observation.

Ears, Hearing

Three children were found to be suffering from ear disease and were recommended for treatment.

Children suspected to have defective hearing are tested by a Pure Tone Audiometer at the Llandrindod Wells Residential School for the Deaf. I should like to express my thanks to the Headmaster of this School for his kind help in this matter.

Nose and Throat Conditions

Fifteen children were found to have enlarged tonsils and adenoids, but only three were referred with the consent of the family doctor to a Consultant Ear, Nose and Throat Surgeon, for advice as to whether operative treatment was advised.

Conservative measures were adopted in other cases, particularly dental treatment, breathing exercises and measures to improve the general health.

Tonsillectomy

As indicated above, only three children were referred by the school doctors to a Consultant for decision as to whether operation was required.

Heart and Circulation

One child showed evidence of heart disease, but was not excluded from games or physical training. Six children were kept under observation.

Lungs

Eight were kept under observation.

Orthopaedic Defects

Two children needed treatment for poor posture. Fifteen children who had 'flat' feet were recommended for treatment, which usually entails raising the inner border of the heels of the shoes, and doing remedial exercises.

Follow-up notices were sent to the school nurses for those children having orthopaedic defects, recommending the form of exercise necessary.

Physical Condition

On completion of the medical examination of a child, he or she is assessed on general health and placed in one of two classifications, namely, satisfactory or unsatisfactory. Eight children, that is, 1.03% of all children examined, were considered to be in an unsatisfactory condition.

TREATMENT OF PUPILS WITH DEFECTS

Altogether 222 children at periodic inspection and 16 at special inspection were found to be suffering from defects considered to require treatment. Except for defects of refraction, these were referred to the family doctor who was informed that if specialist treatment was required, the School Medical Service could make arrangements for this.

School children were sent to the following hospitals outside the County for advice and treatment by Consultants during the year.

Cottage Hospital, Builth Wells.
Cottage Hospital, Kingston.
General Hospital & County Hospital, Hereford.
Eye, Ear and Throat Hospital, Shrewsbury.
Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry.
Victoria Eye Hospital, Hereford.

School children were treated as in-patients at the Llandrindod Wells Hospital during the year for the following:-

<u>Condition</u>	<u>No. Treated</u>
Appendicitis	6
Concussion and Facial Abrasions	1
Hydrocele	5
Pneumonia	1

Orthopaedic Treatment

Orthopaedic Clinics are held at monthly intervals at County Hall by a Consultant and Registrar from the Oswestry Orthopaedic Hospital, and after-care is supervised by an Orthopaedic Sister who attends a Clinic held twice monthly in the same building.

Treatment of Defective Vision and Squint

212 children were examined by the Consultant Ophthalmic Surgeon, Mr. S.S.F. Munro; spectacles were prescribed for 69 children, in 10 cases no change of spectacles previously prescribed was recommended and in 94 cases no spectacles were prescribed and 39 children were discharged.

Deaf

One deaf child attended the Llandrindod Wells Residential School as a boarding pupil.

Partially-Hearing Pupils

One partially-hearing pupil of school age is a boarding pupil at Needwood School near Burton-on-Trent, and one partially-hearing pupil attends the Llandrindod Wells Residential School as a day pupil, and attends the Llandrindod Wells Secondary Modern School for two half days each week.

Educationally Subnormal Pupils

Seven children attended Residential Special Schools for Educationally Subnormal Pupils. Three children in need of such treatment remain unplaced. Ascertainment of educationally subnormal pupils is incomplete.

Physically Handicapped Pupils

A boy from Knighton suffering from Cerebral Palsy continues at the Craig-y-Parc Special School, Cardiff, and is making good progress.

DENTAL REPORT

"In my twentieth and final report on the dental services it is appropriate that I should comment on its progress during my period of office.

A preliminary survey revealed an unusual level of dental disease. 92% of the school population required extensive conservative or radical treatment. This compared with a figure ranging between 45% - 55% in my previous post (at this period sugar was still rationed). Samples of the water supply showed a fluoride deficiency, but the diversity of sources made any correction impossible.

Improved dental hygiene and frequent regular treatment was the only answer. The idea of regular dental treatment was not generally accepted. Dentistry was equated with toothache and extractions, and a long period of health education was required to change this attitude.

Treatment in the rural areas was given under very poor conditions. The corner of a classroom, an entrance hall, poor natural light, no running water, portable equipment and school desks as improvised furniture was the norm. Patients are apt to assess the quality of treatment by the conditions in which it is provided and these conditions were a serious hindrance to the development of a dental health education programme.

The provision of a Mobile Dental Clinic was recommended, despite some misgivings as to the accessibility of some schools.

This Clinic came into service in late 1953. The beneficial effect of this pioneering effort to bring modern dental facilities to rural Wales, was immediately obvious and the acceptance of routine conservation has improved steadily over the years. A policy of visiting schools between routine treatment sessions, established friendly relations with the children further abraded the resistance to the idea of treatment. In later years, the development of techniques of suggestion and relaxation derived from hypnosis was a valuable aid particularly to the very nervous and hitherto untreatable child.

The declared aim of the School Dental Service is that all children should end their school life with a complete and healthy dentition. To achieve this entails good dental hygiene, combined with regular inspection and treatment at intervals not exceeding a maximum of six months. The primary objective of annual inspection and treatment was achieved, but experience proved that even this modest objective could only be sustained if everything was favourable. The abolition of sugar rationing and the increasing demand for orthodontic treatment added to the difficulty.

The Authority agreed in 1964 to the appointment of one additional dental officer. Unfortunately, applicants were few and unsatisfactory. In more recent years measures of economy, which in my opinion, the dental services bore more than their share have further delayed this appointment.

Meanwhile as dental awareness grew, demands for conservative treatment, particularly in the younger age group expanded. This combined with a reduction in General Dental Service Practitioners made it impossible for one officer to give a satisfactory service to such a wide area. In view of these considerations, the additional dental officer post was upgraded to Senior Dental Officer and Mr. D.M. Hobbs was appointed and will take up duty on 1st April, 1971.

Equipment

When the Llandrindod Clinic was equipped in 1950, the prevalent idea was that a clinic should be austere, and any colour other than white was unthinkable. Equipment also, was of pre-war design, and the adapted rooms had many disadvantages.

A major reconstruction was completed in 1968. The interesting decoration, cheerful waiting room and unobtrusive equipment, make this a very satisfactory clinical unit.

The original Mobile Clinic has given many years of useful service and would possibly still be of use as a secondary static clinic. A second Mobile Clinic came into service this year. The replacement of the original clinic would complete the re-equipment of the service.

Progress through the years has not been as satisfactory as I could have wished but with two dental officers in post at least the starting point of a truly comprehensive service has been reached and I can only regret that this point coincides with my own retirement.

In conclusion I would like to express my gratitude to all those who have helped during the years and particularly to Miss Olwen Mantle, my Surgery Assistant, who has given me invaluable help during the past twelve years.

P.G.H. GRIFFITH."

INFECTIOUS AND CONTAGIOUS DISEASES

Certificates of exclusion from school were issued in respect of individual children suffering from infectious and contagious diseases as follows:

Infectious Diseases	Chicken Pox	7
	German Measles	3
	Infective Jaundice	2
	Measles	58
	Mumps	56
	Salmonella	1
	Scarlet Fever	10
Contagious Diseases	Impetigo	2
	Ringworm	2

EXAMINATION OF TEACHERS AND CANTEEN STAFF

The medical examination of intending teachers prior to their acceptance by training colleges or universities, and of newly-appointed teachers and canteen staff was continued during the year. One object is to ensure that no-one is appointed to a post in close contact with children who is likely to be suffering from a communicable disease. An x-ray examination of the chest is made at the Llandrindod Wells Hospital as no Mass Radiography Unit is available. Twelve intending teachers, twenty-seven appointed teachers and twenty-eight canteen staff were examined by me during the year.

LLANDRINDOD WELLS RESIDENTIAL SCHOOL

In addition to their work in Radnorshire schools, the Principal School Medical Officer and the Principal School Dental Officer and Dental Attendant, continue to undertake similar work at the Llandrindod Wells Residential School, which is administered by the Welsh Joint Education Committee and is a Residential Special School for Deaf and Partially-Hearing Pupils serving Wales and Monmouthshire.

SCHOOL ATTENDANCES

At the end of 1970, there were 3,121 children attending Radnorshire schools. 1,871 children were on the registers of the thirty-two primary schools, and 1,250 children attended the six secondary schools.

VISITS BY HEALTH VISITORS AND SCHOOL NURSES

The following visits have been made by the Health Visitors and School Nurses during the year:

Medical Inspection Sessions	67
Hygiene Inspection Sessions	50
Re-Inspections Hygiene	46
Follow-up Medical Sessions	36
Follow-up Hygiene Sessions	24
Pre-Medical (Eyes)	48

TABLE A - PERIODIC MEDICAL INSPECTIONS

Age Groups Inspected	No. of Pupils Inspected	Physical Condition of Pupils Inspected			(5)	(6)	(7)
		Satisfactory	Unsatisfactory	No.			
(1)	(2)	(3)	(4)				
1966 & later							
1965	12	11	1	9.44	-	2	2
1964	176	175	1	0.57	5	21	19
1963	37	37	-	-	1	4	4
1962	23	23	-	-	2	3	3
1961	16	16	-	-	3	4	3
1960	8	8	-	-	3	2	1
1959	58	58	-	-	-	6	7
1958	181	179	2	-	8	27	31
1957	47	47	-	1.11	2	5	5
1956	35	35	-	-	1	6	7
1955 & earlier	57	57	-	-	2	11	10
	91	91	-	-	6	18	21
TOTAL	741	737	4	0.54	34	109	113

DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR

Table A - Periodic Inspection

Defect or Disease (2)		Periodic Inspections							
		Entrants		Leavers		Other		Total	
		T (3)	O (4)	T (5)	O (6)	T (7)	O (8)	T (9)	O (10)
4	Skin	-	13	1	3	-	-	1	16
5	Eyes								
	(a) Vision	10	36	10	6	-	-	20	42
	(b) Squint	1	4	1	3	-	-	2	7
	(c) Other	-	-	-	-	-	-	-	-
6	Ears								
	(a) Hearing	1	12	2	1	-	-	3	13
	(b) Otitis Media	-	2	-	-	-	-	-	2
	(c) Other	-	-	-	-	-	-	-	-
7	Nose and Throat	2	10	1	2	-	-	3	12
8	Speech	8	5	-	2	-	-	8	7
9	Lymphatic Glands	-	4	-	1	-	-	-	5
10	Heart	-	5	1	1	-	-	1	6
11	Lungs	1	7	1	1	-	-	2	8
12	Development								
	(a) Hernia	1	7	-	1	-	-	1	8
	(b) Other	-	3	-	1	-	-	-	4
13	Orthopaedic								
	(a) Posture	-	1	2	-	-	-	2	1
	(b) Feet	5	15	4	11	-	-	9	26
	(c) Other	-	-	-	-	-	-	-	-
14	Nervous System								
	(a) Epilepsy	-	-	-	-	-	-	-	-
	(b) Other	3	3	1	3	-	-	4	16
15	Psychological								
	(a) Development	-	-	-	-	-	-	-	-
	(b) Stability	-	2	-	3	-	-	-	5
16	Abdomen	-	3	-	2	-	-	-	5
17	Other	1	1	-	1	-	-	1	2

SPECIAL INSPECTIONS

Defect Code No. (1)	Defect or Disease (2)	Special Inspections	
		Pupils Requiring Treatment (3)	Pupils Requiring Observation (4)
4	Skin	-	-
5	Eyes (a) Vision (b) Squint (c) Other	- - -	- - -
6	Ears (a) Hearing (b) Otitis Media (c) Other	1 - -	1 1 -
7	Nose and Throat	-	-
8	Speech	2	-
9	Lymphatic Glands	-	-
10	Heart	-	-
11	Lungs	1	-
12	Orthopaedic (a) Posture (b) Feet (c) Other	- 2 3	- 2 1
13	Development (a) Hernia (b) Other	- 3	- -
14	Nervous System (a) Epilepsy (b) Other	- -	- -
15	Psychological (a) Development (b) Stability	1 1	- 3
16	Abdomen	-	-
17	Other	2	-

Table B - Other Inspections

No. of Special Inspections	30
No. of Re-inspections	31
	<hr/>
Total	61
	<hr/>

Table C - Infestation with Vermin

(a) Total no. of individual examinations of pupils in schools by school nurses or other authorised persons.	814
(b) Total no. of individual pupils found to be infested.	3
(c) No. of individual pupils in respect of whom cleansing notices were issued. (Section 54 (2), Education Act, 1944)	-
(d) No. of individual pupils in respect of whom cleansing orders were issued. (Section 54 (3), Education Act, 1944)	-

PART III TREATMENT OF PUPILS

Table A - Eye Diseases, Defective Vision and Squint

	<u>No. of cases known to have been dealt with</u>
External and other, excluding errors of refraction and squint	Nil
Error of refraction (including squint)	407
No. of pupils for whom spectacles were prescribed	202

Table B - Diseases and Defects of Ear, Nose and Throat

Received operative treatment	
(a) for diseases of the ear	Nil
(b) for adenoids and chronic tonsillitis	Nil
(c) for other nose and throat conditions	Nil
Received other forms of treatment	20
	—
Total	20
	—
Total no. of pupils in schools who are known to have been provided with hearing aids	
(a) in 1970	1
(b) In previous years	6
	—
Total	7
	—

Table C - Orthopaedic and Postural Defects

(a) Pupils treated at clinics or outpatients' departments	Figures not available
(b) Pupils treated at school for postural defects	Nil

Table D - Diseases of the Skin (excluding uncleanliness)

	<u>No. of cases known to have been treated</u>
Ringworm (scalp)	1
(body)	1
Impetigo	2
Total	<u>4</u>

Table E - Child Guidance

Pupils treated at Child Guidance Clinics

4

Table F - Speech Therapy

Pupils treated by Speech Therapist

12

Table G - Other Treatment Given

(a) Pupils with minor ailments	-
(b) Pupils who received convalescent treatment under School Health Service arrangements	-
(c) Pupils who received B.C.G. Vaccination	225
Total	<u>225</u>

PART IV - DENTAL INSPECTION AND TREATMENT
(carried out by the Authority)

(a) Attendances and Treatment

	<u>Ages</u> <u>5-9</u>	<u>Ages</u> <u>10-14</u>	<u>Ages</u> <u>15 & Over</u>	<u>Total</u>
First Visit	474	349	51	874
Subsequent Visits	54	106	18	178
Total Visits	528	455	69	1,052
Additional courses of treatment commenced	11	9	6	26
Fillings in permanent teeth	206	272	34	512
Fillings in deciduous teeth	280	54	-	334
Permanent teeth filled	200	266	34	500
Deciduous teeth filled	279	54	-	333
Permanent teeth extracted	6	11	2	19
Deciduous teeth extracted	239	109	-	348
General anaesthetics	-	-	-	-
Emergencies	39	13	14	66
Number of pupils x-rayed			19	
Prophylaxis			852	
Teeth otherwise conserved			1,281	
No. of teeth root filled			-	
Inlays			-	
Crowns			-	

(b) Prosthetics

	<u>Ages</u> <u>5-9</u>	<u>Ages</u> <u>10-14</u>	<u>Ages</u> <u>15 & Over</u>	<u>Total</u>
Pupils supplied with F.U. or F.L. (First time)	-	-	-	-
Pupils supplied with other dentures (First time)	-	1	-	1
No. of dentures supplied	-	1	-	1

(c) Anaesthetics

General Anaesthetics administered by Dental Officer Nil

(d) Inspections

a. First Inspection at School.	No. of Pupils	2,144
b. First Inspection at Clinic.	No. of Pupils	22
Number of a. and b. found to require treatment		1,728
Number of a. and b. offered treatment		1,445
c. Pupils re-inspected at School Clinic		27
Number of c. found to require treatment		27

(e) Sessions

Sessions devoted to treatment	236
Sessions devoted to inspection	38
Sessions devoted to Dental Health Education	2

(f) Orthodontics

New cases commenced during year	17
Cases completed during year	30
Cases discontinued during year	5
No. of removable appliances fitted	15
No. of fixed appliances fitted	2

HANDICAPPED PUPILS IN RADNORSHIRE

	1. Blind	2. Partially sighted	3. Deaf	4. Partially-hearing	5. Physically Handicapped	6. Delicate	7. Maladjusted	8. Educationally subnormal	9. Epileptic	10. Speech defects	Total
Number of handicapped pupils from the area attending Special School as day pupils:	-	-	-	1	-	-	-	-	-	-	1
Boarding pupils:	-	-	1	1	1	-	-	7	-	-	10
Number of handicapped pupils from the area requiring places in Special Schools or Homes, but remaining unplaced:	-	-	-	-	-	-	-	*3	-	-	3
TOTALS	-	-	1	2	1	-	-	10	-	-	14

* 2 placed at beginning of 1971.

WELSH JOINT EDUCATION COMMITTEE

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LLANDRINDOD WELLS RESIDENTIAL SCHOOL

ANNUAL REPORT

of the

SCHOOL MEDICAL OFFICER

for

1970

F.J.H. CRAWFORD, M.D., B.Sc., D.P.H.

Barrister-at-Law.

TO THE CHAIRMAN AND MEMBERS OF THE GOVERNING BODY
OF THE LLANDRINDOD WELLS RESIDENTIAL SCHOOL

Madam Chairman, Ladies and Gentlemen,

I have the honour to present to you my report for 1970 as School Medical Officer of the Llandrindod Wells Residential School.

Once again I am happy to report that on the whole the health of the pupils was excellent and apart from forty-six cases of the common cold and other upper respiratory tract infections, no child developed any infectious disease.

For the greater part of the year, Miss G.A.M. Turner assisted me as School Nurse. She resigned on 31st October to take up an appointment as Assistant Matron of the County's Old People's Home in Rhayader. Mrs. Day who had been employed as School Nurse until March, 1969, was fortunately able to take up the appointment of School Nurse once again and commenced duty on the 31st October. I am most grateful to both Miss Turner and Mrs. Day for their help and their devoted attention to the health of the children in the School.

I am most grateful to you also, Madam Chairman, and Members of the Committee for your interest and support and to the Headmaster and Matron of the School for their co-operation.

I am,

Your obedient servant,

FRANK J.H. CRAWFORD.

ANNUAL REPORT OF THE SCHOOL MEDICAL OFFICER FOR 1970.

PARTIALLY DEAF CHILDREN

At the beginning of the year there were sixty pupils in the School of whom four were classified as partially deaf. Of these three were regarded as having inherited this condition. Maternal rubella was the cause in the fourth case.

It is interesting that in 1970 only 26% of the profoundly deaf children in the School had lost their hearing as a result of disease. This compares with 53% ten years ago. This significant change is, of course, the result of advances in medical treatment.

PROFOUNDLY DEAF CHILDREN

Of the profoundly deaf pupils the causes of deafness were as follows:-

"Meningitis"	4
Pneumococcal Meningitis	2
Kernicterus	1
Maternal Rubella	5
Maternal Toxaemia	1
Influenza	1
Cause Unknown	3
Congenital	39

CHILDREN WITH MULTIPLE DEFECTS

Nine children had significant permanent defects as stated in addition to deafness:-

Klippel-Feil Syndrome	1
Klippel-Feil and Mobius Syndrome	1
Mental Retardation	2
Mental Retardation, Hiatus Hernia, Oesophageal Stricture	1
Cerebral Palsy	1
Cerebral Palsy and Mental Subnormality.	1
Retinitis Pigmentosa	2

ROUTINE MEDICAL INSPECTIONS

All sixty pupils at the School were examined by me at routine medical inspection. I was assisted at each session by the School Nurse, who also, before each inspection, tested the vision of each child.

ADMISSIONS TO SICK BAY

Thirty-seven children were admitted to the sick bay, but none was seriously ill. They included one case of pleurisy and bronchitis, and one case of tonsillitis.

ADMISSION TO HOSPITALS

One child was admitted to the Llandrindod Wells Hospital suffering from pneumonia. One child who has congenital atresia of the oesophagus was admitted to the Birmingham Children's Hospital for dilation of the oesophagus, and one boy suffering from mastoid infection was admitted to Singleton Hospital, Swansea, for radical mastoidectomy.

PUPILS ATTENDING OUT-PATIENT CLINICS

Four children attended the Llandrindod Wells Orthopaedic Clinic, one having sustained a dislocated elbow. One child attended the Dermatological Clinic at the Royal Gwent Hospital but was not found to require treatment. One child attended the Hereford General Hospital for renal investigation. Twelve children attended the Eye Clinic at the Llandrindod Wells Hospital. Four children had plantar warts treated, by excision and cauterization, as out-patients at the Llandrindod Wells Hospital.

VISITS OF CONSULTANT AURIST

Forty-six children were seen in the School on two occasions by Mr. Crowther, the visiting Ear, Nose and Throat Consultant.

B.C.G. VACCINATION

For the protection of the pupils against tuberculosis B.C.G. vaccination was again offered to those pupils in the 13 - 14 year age group and to those older pupils who had not previously accepted this protection.

Consents were given for two children in the eligible age group. These were both tuberculin negative and were given B.C.G. vaccine.

RUBELLA VACCINATION

Six girls were vaccinated against German Measles (Rubella).

REPORT OF THE SCHOOL DENTAL OFFICER

Mr. P.G.H. Griffith, L.D.S., submits the following report:-

All the pupils at the School were inspected and offered treatment with the usual acceptance rate of 100%.

It is pleasing to note that practically all treatment required was conservative, which reflects the high standard of dental hygiene maintained at the School.

The friendly confidence of these children overcomes the occasional difficulties of communication and is a tribute to the happy atmosphere in the School.

I would like to thank Mr. Richards and his staff for their help and co-operation.

PUPILS FOUND TO REQUIRE TREATMENT

Number of individual pupils found at periodic inspection to require treatment (excluding treatment, Spanish Detachment, Dental Division and Infestation with Vermin).

<u>Group</u>	<u>For Defective Vision (excluding contact)</u>	<u>For other conditions recorded in table</u>	<u>Total</u>
Extracurricular	1	1	2
Annular	1	1	2
Leavers	1	1	2
Total	3	3	6

STATISTICS FOR THE PUPILS ATTENDING THE RESIDENTIAL
SCHOOL FOR THE DEAF, LLANDRINDOD WELLS.

TABLE 1

A. PERIODIC MEDICAL INSPECTIONS

Number of Routine Inspections:-

Entrants	4
Annuals	48
Leavers	8
	<hr/>
Total	60
	<hr/>

PUPILS FOUND TO REQUIRE TREATMENT

Number of individual pupils found at periodic inspection to require treatment (excluding Deafness, Speech Defects, Dental Disease and Infestation with Vermin).

<u>Group</u>	<u>For Defective Vision (excluding squint)</u>	<u>For any of the other conditions recorded in Table</u>	<u>Total Individual Pupils</u>
		2	
Entrants	-	1	1
Annuals	9	9	18
Leavers	3	2	5
Total	12	12	24

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR
ENDED DECEMBER, 1970.

TABLE 2

<u>Defect Code No.</u>	<u>Defect or Disease</u>	<u>Requiring Treatment</u>	<u>No. of Defects Required to Be Kept Under Observation, but not Requiring Treatment</u>
4	Skin	-	2
5	Eyes (a) Vision	12	4
	(b) Squint	1	-
	(c) Other	-	-
6	Ears (b) Otitis Media	1	1
	(c) Other	-	-
7	Nose and Throat	1	3
9	Lymph Glands	-	1
10	Heart and Circulation	-	3
11	Lungs	1	2
12	Development (a) Hernia	-	1
	(b) Other	3	1
13	Orthopaedic (a) Posture	1	2
	(b) Flat foot	-	1
	(c) Other	-	3
14	Nervous System (a) Epilepsy	-	-
	(b) Other	1	1
15	Psychological (a) Development	1	4
	(b) Stability	-	2
16	Abdominal	-	-
17	Other	-	-

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR

DENTAL TREATMENT

No. of children actually treated 60

Attendances made by pupils for treatment 79

Fillings 43

Extractions 4

Administration of general
anaesthetics Nil

Other operations 109

ORTHODONTICS

Appliances fitted 1

